

**PERMIT FOR NONGOVERNMENT  
ELECTRIC APPLIANCE**

Instructions: Submit in duplicate, one copy will be returned to requester. Approvals must be posted adjacent to installed appliance.

To: GSA, JPMT  
Room 106  
915 Second Avenue  
Seattle, WA 98174  
**FAX: (206) 220-5025**

From: (Agency Office)  
\_\_\_\_\_  
\_\_\_\_\_

Request approval to install the non government-owned electrical appliance described below at the location indicated.

Description of Appliance

To be installed at (Bldg. & Room No.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for installation

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Upon approval by G.S.A. the following conditions will be adhered to by the requesting agency.

1. A safety check of the equipment is conducted once each quarter and a log of such inspections is maintained.
2. The agency is responsible for making sure that the equipment and the immediate area is maintained in sanitary manner.
3. The agency is responsible to insure that the appliance is turned off when not in use and that it is turned off at the close of business and off hours.  
(Example: coffee pots, coffee makers, hot plates, radios, etc.)

Requester signature

Title

Phone No.

Date

\_\_\_\_\_

**ACTION BY GSA BUILDING MANAGER**

Request is \_\_\_\_\_ Approved \_\_\_\_\_ Disapproved

Signature

Phone No.

Date

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**To be completed when applying for new or replacement  
Non-Governmental Electrical Appliance Permit**

Is item new or replacement?	
Type of item: (ie. refrigerator, microwave, coffee pot, etc.)	
Is item new or used?	
Information from old unit nameplate, if applicable	
Size of unit:	
Full load amps:	
Model:	
Serial #:	
Information from New/Replacement unit nameplate	
Size of unit:	
Full load amps:	
Model:	
Serial #:	
Circuit #:	
Requesters Name:	<div>Print or Type</div>
Requester's Agency	
Phone Number:	
Address and Room Number:	
<p><i>I warrant that this unit complies with all federal, state and local fire and safety regulations pertaining to this location.</i></p>	
Safety Officer's Signature Requesting Agency	Date